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## APPLICANTS

Mark A. Lemkin, El Cerrito, CA;

William A. Clark, Fremont, CA;

Thor N. Juneau, Berkeley, CA; Allen W. Roessig, Fremont, CA;

## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/139,352 06/15/1999 *He*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *None*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 08/04/2000

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 7	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>Heinrich</i>	Initials <i>He</i>		

## ADDRESS

28554

VIERRA MAGEN MARCUS HARMON &amp; DENIRO LLP

685 MARKET STREET, SUITE 540

SAN FRANCISCO, CA

94105

## TITLE

Structure for attenuation or cancellation of quadrature error

FILING FEE  RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )